

PATENT APPLICATION DECLARATION AND POWER OF ATTORNEY

I HEREBY DECLARE THAT:

My residence, post office address and citizenship are as stated next to my name on page 3 hereof.

I verily believe I am the original, first and sole inventor (if only one name is listed below) or a joint inventor (if plural inventors are listed below) of the invention entitled:

Combination Hall-Effect Position Sensor and Switch

the specification of which:

 X is attached hereto,
 _____ and includes the accompanying amendment;

_____ was filed on _____ as Application Serial No. _____
 and was amended on _____ (if applicable).

I hereby state that I have reviewed and understand the contents of the above-identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose to the United States Patent Office all information known to me to be material to patentability as defined in Title 37, Code of Federal Regulations, Section 1.56.

I hereby claim foreign priority benefits under Title 35, United States Code, section 119, of any foreign application(s) for patent or inventor's certificate listed below and have also identified below any foreign application for patent or inventor's certificate having a filing date before that of the application on which priority is claimed:

<u>Prior Foreign Application</u>			<u>Priority Claimed</u>	
(Number)	(Country)	(Day/Month/Year Filed)	Yes	No

None

PATENT APPLICATION DECLARATION AND POWER OF ATTORNEY

I hereby claim the benefit under Title 35, United States Code, Section 119(e) of any United States provisional application(s) listed below:

Application Number

Filing Date

None

I hereby claim the benefit under Title 35, United States Code, section 120 of any United States application(s) listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States application in the manner provided by the first paragraph of Title 35, United States Code, section 112. I acknowledge the duty to disclose to the United States Patent Office all information known to me to be material to patentability as defined in Title 37, Code of Federal Regulations, Section 1.56 which became available between the filing date of the prior application and the national or PCT international filing date of this application:

(Serial #)

(Filing Date)

(Status--patented, pending, abandoned)

None

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

I hereby appoint the following registered practitioner(s) to prosecute this application and to transact all business in the United States Patent and Trademark Office connected therewith:

Mark P. Bourgeois, Registration No. 37,782

Steven D. Weseman, Registration No. 41,372

whose mailing address for this application is: CTS Corporation
905 West Boulevard North
Elkhart, IN 46514
Telephone: (574) 522-7996

PATENT APPLICATION DECLARATION AND POWER OF ATTORNEY

Full name of SOLE or FIRST inventor Kurt Etherington
Citizenship USA Residence 65930 Conrad Road
Edwardsburg, MI 49112

Post Office Address (if different) _____

Inventor's Signature:  Date: 12/19/03
Kurt Etherington

Full name of SECOND inventor Craig Jarrard
Citizenship USA Residence 611 Spring Arbor Drive
Middlebury, IN 46540

Post Office Address (if different) _____

Inventor's Signature:  Date: 12/19/03
Craig Jarrard

Full name of THIRD inventor _____
Citizenship _____ Residence _____

Post Office Address (if different) _____

Inventor's Signature: _____ Date: _____

Full name of FOURTH inventor _____
Citizenship _____ Residence _____

Post Office Address (if different) _____

Inventor's Signature: _____ Date: _____

Full name of FIFTH inventor _____
Citizenship _____ Residence _____

Post Office Address (if different) _____

Inventor's Signature: _____ Date: _____